ATION, POWER OF ATTORNEY AND POWER TO

TOVECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the utility entitled SAFETY DEVICE COMBINATION FOR ELECTRICAL APPARATUS

the specification of which [check one(s) applicable]

was filed

as PCT International/U.S. Application No.

and was amended by Amendment filed

(if applicable); [or]

XXX is attached to this Seclaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Rule 56(a) [37CRF\$1.56(a)]

POWER OF ATTORNEY: As Inventor, I hereby appoint ZACHARY T. WOBENSHITB, III, Reg. NO. 26,524 of PIPERSVILLE, Pennsylvania, as my attorney with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

POWER TO INSPECT: I hereby give ZACHARY T. WOBENSHITH, III, of PIPERSVILLE, Pennsylvania or his duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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